		State of Nebraska	Vahiola Accide	ont Bonort		
		Investigator's Motor	Venicle Accide	HIT & RUN?	Sheet of	
7_	Total Number of Vehicles	Local No./ District U (-116329	HIT & HUN?	SYES ONO	11
A/1	DATE M M	M / D D / Y Y Y		(In Military Time)	STATE USE ONLY	┼
01	OF ACCIDENT	7 18 20 13 6	WIT WITH F S TIME OF ACCIDE	NT (S 4)		
A/2	BLACE COUNTY		POLICE		LATITUDE	1
<u></u>	OF ACCIDENT	Lancaste	NOTIFIE		LAMIODE	
В	CITY	Lincolla		PRIVATE YES NO PROPERTY?	LONGITUDE	1
SS	ROAD ON WHICH		. Street	ONE-WAY YES NO		
ľ , l	DISTANCE FROM	FEET N S E W OF		VAY NO.	SHOULD LOCATION HAVE ENGINEERING STUDY?	1
	MILEPOST	IF AT INTERSECTION	IF NOT AT INTE	ERSECTION	YES NO	
1	NAN	ME OF INTERSECTING ROADWAY			T, BRIDGE, RAILROAD CROSSING	1
V1/M						
03	MILES		N S E W OF NEAREST	FROM NEAREST TOWN]
V2/M	MILES	N S E W AND MILES	N S E W OF NEAREST	N		
lo 1	R. WORK R1	R2 R3 R4 S. PEDESTRIAN S1	S2 S3 S4 S5-a S5-b		ENT INVOLVE DAMAGE TO OF ROADS' PROPERTY?	1
E	ZONE CODES	CLASSIFICATION		OYE		
2			VEHICLE NO. 1			<u> </u>
F,	DRIVER LICENSE	NO. WI 789524	7	STATE (Of License)	NE SEX FEMALE]
V1/N	DRIVER		PHONE	\	LOCAL NO.	1
5	A) (-a	Labra Garci		2)573 -347 <u>4</u> DATE OF		<u> </u>
V2/N	2007	sandalwooder Linco	old Ne GOSZ			18
لنا	OWNER LANG	erman at Alfa Labre (Gaccia (48.	8778-052 (s	LOCAL NO.	V1/2
G	OWNER ADDRESS	CITY, STATE,	ZIP	CITATION YES	CITATION NO.	1
2	Byso Sor	rdal wood Dr Lancal	n Ne 68520	PENDING NO	LR YOSB30	V1/3
اے "		NO. T 6 W 8 Z 1	BODY STYLE	(Plate Expires)	4 (Of Plate) NE	V1/4
<u>جي</u> ا	VEHICLE 7	COLY KIA SI	LR Utility	1 Grey	TOTALED \$ 3121	
2	VEHICLE ID .	XVVTUAJUE	651481	INSURANCE COMPANY	. •	V1/5
V2/O	TOWED TO	TOWED BY		POLICY NO.	<u> </u>	V1/6
1			VEHICLE NO. 2		· · · · · · · · · · · · · · · · · · ·	35
	DRIVER	NO. H 1 3 7 7 6 6 9	5	STATE (Of License)	SEX FEMALE	
V1/P	DRIVER I	NO. HILLS 217 6 6 9	PHONE		LOCAL NO.	
	DRIVER ADDRESS	e N. Wright		2) 70 2 - 9977 DATE OF	<u> </u>	V2/1
V2/P	1724 S.	215 #5 Lines	n Ne 6850) <u>B</u>
Ш	OWNER	0 101-201-	PHONE (4 2)	2)202-9922	LOCAL NO.	
	OWNER ADDRESS	CITY, STATE.	ZIP ,	CITATION YES	CITATION NO.	V2/3
01	1274 5.	21- 75 4760	Ne 66505	PENDING NO	STATE (1
νι/ο U		NO. SSTGGG	BODY STYLE	(Plate Expires)	STIMATED DAMAGE	V2/4
V2/Q	VENIOLE		marique vide	Rive	TOTALED \$ 93141	V2/5
7	VEHICLE ID	22WS5ZH7Y	F18903	NSURANCE COMPANY	e_Universal	[1 8
K	TOWED TO	TOWED BY	11 (19 (19 3)	POLICY NO		V2/6
07	0000	lete this postion for all injury	d noroono	DATE OF BIRTH	956	35
	(Comp	plete this section for all injured aplete a continuation report, if more than three w	vere injured)	(MM/DD/YYYY)	Seat Position Eject Body Region Sev. Trans	SEX
VEH. #	NAME	ADDRESS		1 1		
1 1	LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	<u></u>	EMS RUN REPORT NO.	
	mne -	ADDRESS		T		
VEH. #	INOME	NUUMESS		/ /		1
	LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME		EMS RUN REPORT NO.	_
VEH. #	NAME	ADDRESS			 	
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	LOCAL, NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME		EMS RUN REPORT NO.	
DR Fo	orm 40, Jan 09	THIS	S FORM REPLACES DR FORM 40, JAN 02			C1(1)

E street 31' wide 2.st = 31' wide (**) = stop sign **			T	HE FC	OLLOW	ING IN	IPURN			QUIKED FO	JK AL			3				
POI=approx 10' S of N of E street approx 14' E of W of 21st E street The driver of Vehil said that she was W B on E street at 21st and that she did not see Vehi22' S t = 31' wide """ = stop sign The driver of Vehil said that she was W B on E street at 21st and that she did not see Vehi22' S b on 21st so she entered the intersection and was in collison with Vehi2. The driver of Vehics side that she was W B on E street at 21st and that she did not see Vehi22' S b on 21st so she entered the intersection and was in collison with Vehi2. The driver of Vehics side that she was S W B on E street at 21st and that she did not see Vehi22' S B on 21st so she entered the intersection and was in collison with Vehi2. The driver of Vehics side that she was S W B on E street at 21st and that she did not see Vehi22' S B on 21st street when Vehi11' violated the stop sagn on the NE corner enter ring 21st street at striking her vehicle """ **GACHIO COMMENT OF THE STREET OF THE STREE															NO.			
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